·									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD														
Effective December 8, 2004														
CLAIMS AS FILED - PART I									ENTITY			THAN		
(Column 1) (Column 2)								TYPE		OR	SMALL	ENTITY		
TOTAL CLAIMS			34					RATE	FEE		RATE	FEE		
FOR			NUMBER	FILED	NUM	BER EXTRA		BASIC FI	150.00	OR	Basic Fee	300.00		
TOTAL CHARGEABLE CLAIMS			24mi	nus 20=	. 11	4		X\$ 25=	: \\ S &	OR	X\$50=			
INDEPENDENT CLAIMS			\ ~ minus 3 = .			Q)		X100=	100	OR	X200=			
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+180=		OR	+360=			
* If the difference in column 1 is less than zero, enter *0" in column						column 2	ı	TOTAL	150	OR	TOTAL			
CLAIMS AS AMENDED - PART II									. 1398	3 "	OTHER	THAN		
(Column 1) (Column 2) (Column 3)								SMALI	ENTITY	OR	SMALL			
AMENDMENT A	114-05	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	}	RATE	ADDI- TIONAL FEE		
	Total	. 34	Minus	- 3	34	: 6	.[X\$ 25=		OR	X\$50=			
	Independent	. 13	Minus	•••	13	0		X100=	X.	OR	X200=			
		NTATION OF MI			CLAIM			1100		1	+360=			
Claims 1 - 74 and 87448							L	+180=/	\ <u>\</u>	ÒR	TOTAL			
	75 149-150-151-152-153-15							DOIT FE		OR	ADDIT. FEE			
\55_\5\u00ed(Column 1)\u00ed(5)\u00ed\u00ed(Collumn 2\u00ed(Column 3)\u00ed(5)\u00ed(Collumn 3)\u00ed(5)\u00ed(Collumn 3)\u00ed(5														
AMENDMENT B	9.1-15	CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 60	Minus	-3	4	-32		X\$ 25=		OR	X\$50=	160		
	Independent	· 4	Minus	ses 15	3	-6	Ιſ	X100=		OR	X200=			
	FIRST PRESE	NTATION OF MU	LTIPLE DEF	ENDENT	CLAIM		' [+180=		OR	+360=			
1								TOTAL		OR	TOTAL			
61	26/06	(Column 1)	٠.	(Colum	ID 2)	(Columni 3)	~	0011. FEE						
Ü		CLAIMS REMAINING AFTER AMENDMENT	· .	HIGHE NUMB PREVIOUS PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE		
AMENDMENT	Total	. 44	Minus	- 6.6	2	= 0		X\$ 25°		OR	X\$50=	1		
E	Independent	• 2	Minus	-aa- (1	= 0	F	X100=			X200=	1/		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	~200=	<i>Y</i>		
. 14	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.									OR	+360=			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE ADDIT. FEE												c V		
		mber Previously Pa ber Previously Paid					r four	d in the en	oroorlate box	in cot	ran 1.	ł		